

PUBLIC HEALTH COMMITTEE

PUBLIC HEARING MARCH 20, 2013

RAISED BILL No. 6391 **AAC THE PRACTICE OF ADVANCED PRACTICE REGISTERED NURSES.**

Testimony of Margaret Flinter PHD, FNP-BC, FAANP - IN SUPPORT OF RAISED BILL No. 6391

Members of the Public Health Committee:

Thank you for the opportunity to speak in support of Raised Bill 6391. My name is Dr. Margaret Flinter. I am the Senior Vice President and Clinical Director of the Community Health Center, Inc., a statewide federally qualified health center caring for 130,000 active patients from our primary care sites in thirteen cities, as well as many school based health centers, homeless shelters, and domestic violence centers. My bachelor's, master's, and doctoral degrees in nursing have all been earned in our beautiful state, and I am proud to say that I have continuously held licenses as a registered nurse in Connecticut for nearly 40 years and as a board certified family nurse practitioner and advanced practice RN in our for thirty three years. I am sorry that I cannot deliver this testimony to you directly, but am in Washington DC today, working on health care issues of concern to all of us

I testify today on behalf of my organization, the Community Health Center, Inc. and the clinicians who deliver the care to our patients, including the 70 nurse practitioners/advanced practice RNs on our staff. While the majority of these NPs are family nurse practitioners, we count among our ranks a number of pediatric, adult, psychiatric, and women's health NPs. I speak on behalf of our senior NPs, a number of whom hold clinical and research doctoral degrees.

The "Plain Language Description of the Request" that was submitted to the Department OF PUBLIC HEALTH last fall clearly articulated the multiple compelling and timely reasons why the mandatory collaborative requirement required for APRNs to practice as NPs in Connecticut should be removed. The Request presented evidence based support for the safety and quality of care provided by APRNs across the country, and supporting data showing that this is equally true in the nineteen states in which there are no such requirements.

Primary care is in the process of the most remarkable—and just in time—transformation of our generation from a descent into isolation and frustration to a re-emergence as a specialty of choice based on teamwork, collaboration, autonomy, and professional satisfaction. We cannot afford to deter outstanding candidates from practice in Connecticut. It is time to make this modest change to the language of the statutes and to bring Connecticut to the fore as a leader and a state of "first choice" for nurse practitioner practice.

Thank you.

